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TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORT

980701 12-02-09 TX2010 Ver. 1.0

05-102 (9-09/29) To be filed by Corporations, Limited Liability Companies (LLCS) and Financial Institutions

This report MUST be signed and filed to satisfy franchise tax requirements

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You have certain rights under Chapter 552 and 559, Government Code. to review, request, and correct information we have on file about you.

Filing Number: 4749106

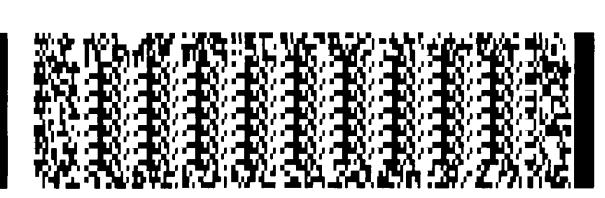
Taxpayer number Report year 15100686722 2010 Contact us at: (512) 463-4600, or (800) 252-1381, toll free nationwide. Taxpayer name DELFASCO, INC. C/O S. DAVID BELSKY, CPA Secretary of State file number or Mailing address Comptroller file number 21 WEST 47 ST. State ZIP Code Plus 4 City 0004749106 10036 NEW YORK NY Check box if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C. Principal office 15 BELLECOR DRIVE, NEW CASTLE, DE Principal place of business 15 BELLECOR DRIVE, NEW CASTLE, DE Officer, director and member information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax Please sign below! report. There is no requirement or procedure for supplementing the information as officers, directors, or members change throughout the year. \*1510068672210\* **SECTION A** Name, title and mailing address of each officer, director or member. Name Director m d d У У Term PHILIP KADLECEK CHAIRMAN YES expiration ZIP Code Mailing address City State PO BOX 10527 19850 WILMINGTON DE Director m m Term DAVID B. LILLY, JR YES expiration Mailing address City State ZIP Code WILMINGTON PO BOX 10527 DE 19850 Director m У Term MARK W. BENKO YES expiration Mailing address ZIP Code City State 19850 PO BOX 10527 WILMINGTON DE SECTION B Enter the information required for each corporation or LLC, if any, in which this entity owns an interest of ten percent (10%) or more. Name of owned (subsidiary) corporation or limited liability company State of formation Texas SOS file number, if any Percentage of Ownership Name of owned (subsidiary) corporation or limited liability company State of formation Texas SOS file number, if any Percentage of Ownership SECTION C Enter the information required for each corporation or LLC, if any, that owns an interest of ten percent (10%) or more in this entity or limited liability company. Name of owned (parent) corporation or limited liability company State of formation Texas SOS file number, if any Percentage of Ownership Registered agent and registered office currently on file. (See instructions if you need to make changes) Check box if you need forms to change Agent: PHILIP E. KADLECEK the registered agent or registered office information. City ZIP Code State Office: 2008 LAKEWAY BLVD. AUSTIN 78734

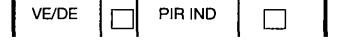
The above information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or member and who is not currently employed by this, or a related, corporation or limited liability company.

Area code and phone number

**Texas Comptroller Official Use Only** 







TX 05-102 (Section A Continuation)	DELFASCO,	INC. (	C/O S.	DAVID	BELSKY,	151006867	22
Name KAREN THOMAS	Title			Director YES	Term expiration		
Mailing address PO BOX 10527	City WILMING'	TON			State DE	2IP Code 19850	
Name	Title			Director YES	Term expiration		
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